

Chapter DHS 140

REQUIRED SERVICES OF LOCAL HEALTH DEPARTMENTS

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Note: Chapter HFS 140 was renumbered chapter DHS 140 under s. 13.92 (4) (b) 1., Stats., and corrections made under s. 13.92 (4) (b) 7., Stats., [Register January 2009 No. 637](#).

DHS 140.01 Authority and purpose. This chapter is promulgated under the authority of s. 251.20, Stats., which directs the department to specify by rule required services for each of 3 levels of local health departments. Under s. 251.05 (2), Stats., all local health departments are to provide at least level I services, while level II and level III local health departments are to provide additional services.

History: Cr. [Register, July, 1998, No. 511](#), eff. 8–1–98.

DHS 140.02 Applicability. This chapter applies to the department and local health departments. Sections [DHS 140.01](#) to [140.04](#) and [140.07](#) apply to all local health departments. Section [DHS 140.05](#) applies to a level II local health department. Section [DHS 140.06](#) applies to a level III local health department.

History: Cr. [Register, July, 1998, No. 511](#), eff. 8–1–98.

DHS 140.03 Definitions. In this chapter:

(1) “Community health assessment” means the regular, systematic collection, assembly, analysis and dissemination of information on the health of the community.

(2) “Department” means the Wisconsin department of health services.

(3) “Environmental health program” means the assessment, management, control and prevention of environmental factors that may adversely affect the health, comfort, safety or well-being of individuals within the jurisdiction of the local health department by individuals qualified under s. 440.98, Stats., and ch. [DHS 139](#).

(4) “Epidemiological investigation” means the systematic examination and detailed inquiry into the circumstances and causal factors associated with a given disease or injury.

(5) “General public health nursing program” means the organization and delivery of public health nursing services by public health nurses qualified under s. 250.06 (1), Stats., and s. [DHS 139.08](#) to individuals within the jurisdiction of the local health department.

(6) “Health promotion” means programs and services that increase the public understanding of health, assist in the development of more positive health practices and enhance or maintain the health of the community as a whole.

(7) “Human health hazard” means a substance, activity or condition that is known to have the potential to cause acute or chronic illness or death if exposure to the substance, activity or condition is not abated or removed.

(8) “Local health department” means an agency of local government that has any of the forms specified in s. 250.01 (4), Stats.

(9) “Local health officer” means the person in charge of a local health department who meets the qualifications and is responsible for carrying out the duties established under s. 251.06, Stats.

(10) “Other disease prevention” means programs and services that reduce the risk of disease, disability, injury or premature death

caused by such factors as risky behaviors, poor health practices or environmental agents of disease.

(11) “Public health system” means organized community efforts aimed at the prevention of disease and the promotion and protection of health, including activities of public and private agencies and voluntary organizations and individuals.

(12) “State health officer” means the individual appointed under s. 250.02 (1), Stats., by the secretary of the department to develop public health policy for the state and direct state public health programs.

(13) “Surveillance” means the ongoing systematic collection, analysis, and interpretation of data concerning disease, injuries or human health hazards, and the timely dissemination of these data to persons responsible for preventing and controlling disease or injury and others who need to know.

History: Cr. [Register, July, 1998, No. 511](#), eff. 8–1–98; corrections in (2), (3) and (5) made under s. 13.92 (4) (b) 6. and 7., Stats., [Register January 2009 No. 637](#).

DHS 140.04 Level I local health department.

(1) **REQUIRED SERVICES.** A level I local health department shall assume leadership responsibility for developing and maintaining the public health system for the area of jurisdiction of the local health department and shall provide or arrange for provision of at least the following services:

(a) *Public health nursing services.* Nursing services through a general public health nursing program. Public health nurses who conduct the program may be directed by the appropriate local authority to do any of the following:

1. Participate in community health assessments; collect, review and analyze data on community health; and undertake case-finding to identify population groups, families and individuals at high risk of illness, injury, disability or premature death.

2. Participate and provide collaborative public health nursing expertise in the development of community plans that include identification of community health priorities, goals and objectives to address current and emerging threats to the health of individuals, families, vulnerable population groups and the community as a whole, and contribute to planning efforts that support community strengths and assets.

3. Participate in the development of programs and services for vulnerable population groups that are based on evaluation of surveillance data and other factors that increase actual or potential risk of illness, disability, injury or premature death.

4. Provide or arrange for the availability of services and actions to promote, maintain or restore health and prevent disease and injury that are directed at current and emerging needs of the community, vulnerable population groups and families and individuals referred by physicians and other health care providers, health maintenance organizations and other sources for health education or follow-up care.

5. Document and evaluate the responses of the community or vulnerable population groups to public health nursing services and actions directed at the community or those groups.

6. Provide or arrange for continuity of health care for individuals and families requesting or referred for nursing services and

provide them with or otherwise arrange for the availability of timely, cost-effective and quality nursing and clinical preventive services through all of the following:

- a. Assessment of their current and emerging health care needs.
- b. Development of effective, efficient and equitable nursing plans of care for families and individuals who will be receiving services for a period of time.
- c. Implementation of nursing plans of care and collaboration with other agencies and organizations, as necessary, to achieve goals included in the plans of care.
- d. Documentation and evaluation of the responses of families and individuals to public health nursing services and actions, in order to provide evidence of professional nursing services provided, determine progress toward goal achievement for a particular family or individual and provide a basis for updating that family's or individual's nursing plan of care.

Note: The Department recommends that local boards of health and other local governing authorities employ the public health nurse responsibilities set out in par. (a) as the basic framework for carrying out the statutorily mandated generalized public health nursing program.

(b) *Services to prevent and control communicable disease.* 1. Activities required of local health departments under ch. **DHS 144**, relating to immunization of students.

2. Activities required of local health officers under ch. **DHS 145**, relating to control of communicable diseases, including the conduct of epidemiological investigations as directed by the department and measures taken to prevent, exercise surveillance over and control diseases transmitted by animals and insects.

Note: Section 254.51, Stats., directs the Department to promulgate rules that establish measures for prevention, surveillance and control of human disease resulting from animal-borne and vector-borne transmission, and directs local health departments to enforce those rules. The particular diseases are included in the list of reportable communicable diseases in Appendix A to ch. **DHS 145**, and therefore local health officers are responsible under ch. **DHS 145** for investigating those diseases and employing appropriate methods of control of them as they are for other communicable diseases covered by that chapter.

3. Maintenance of a surveillance system for communicable diseases reportable under ch. **DHS 145**.

(c) *Services to prevent other diseases.* Development and delivery of services to reduce the incidence or prevalence of the chronic diseases or injuries that are the leading causes of disability and premature death in the jurisdiction of the local health department, the chronic diseases or injuries for which resources are available to the local health department from the department or the chronic diseases or injuries identified through a community needs assessment under s. 251.04 (6) (a), Stats., as priority public health problems, or by the regular and systematic collection of information on the health of the community as required under s. 251.05 (3) (a), Stats. These services shall include all of the following:

1. Informing local elected officials, educators and the general public about the incidence and prevalence of these diseases and injuries in the community.
2. Disseminating department-endorsed prevention guidance related to these diseases and injuries, including information about behaviors known to reduce the risk of contracting them, and training interested members of the public in department-endorsed prevention techniques.
3. Arranging screening, referral and follow-up for population groups for which these activities are recognized by the department as effective in preventing chronic diseases and injuries.
4. Implementing measures or programs designed to promote behavior that is known to prevent or delay the onset of chronic disease or prevent or ameliorate injuries.

(d) *Services to promote health.* Disseminate information to the community or ensure that information is disseminated to the community about the causes, nature and prevention of diseases and health conditions prevalent in the community or for which the incidence could become significant in the community, and about how to maintain and improve health.

(e) *Abatement or removal of human health hazards.* 1. Pursuant to s. 251.06 (3) (f), Stats., investigate and supervise the sanitary conditions of all premises within the local health department's jurisdictional area.

2. Pursuant to s. 254.59, Stats., order the abatement or removal of human health hazards found on private premises and, if an owner or occupant fails to comply, enter the premises and abate or remove or contract for the abating or removal of the human health hazard. As permitted under s. 254.593, Stats., the local health department may declare that specified housing that is dilapidated, unsafe or unsanitary is a human health hazard and proceed in accordance with s. 254.59, Stats., to have the human health hazard abated or removed.

(f) Services to prevent the future incidence of occupational disease, environmental disease and human health hazard exposure. Reporting and investigation of occurrences of occupational disease, environmental disease or exposure to a human health hazard, as required by any rules the department may promulgate under ss. 250.04 (7) and 254.02 (5), Stats.

(2) **OPTIONAL SERVICES.** A level I local health department may provide any services, in addition to the services required under sub. (1), that a level II local health department is required to provide under s. **DHS 140.05** or a level III local health department is required to provide under s. **DHS 140.06**.

(3) **ANNUAL REPORTS.** Within 120 days after the close of the calendar year, a level I local health department shall submit the following reports to the department:

(a) A copy of the local health department's annual report for the preceding calendar year, if required by the local governing body.

(b) Annual survey of local health departments for the Wisconsin public health data system in a format prescribed by the department.

(c) A report, in a format prescribed by the department, on the activities of the local health department for the preceding calendar year, including a narrative which describes the progress and performance toward achieving the objectives that the local health department has identified as part of its community health assessment process.

History: Cr. Register, July, 1998, No. 511, eff. 8-1-98; corrections in (1) (b) made under s. 13.92 (4) (b) 7., Stats., Register January 2009 No. 637.

DHS 140.05 Level II local health department.

(1) **REQUIRED SERVICES.** A level II local health department shall do all of the following:

(a) Provide or arrange for provision of all services required under s. **DHS 140.04** for a level I local health department.

(b) Provide or arrange for the provision of services that address at least one objective from each section of sections 2 to 8 of *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*, published in February 1990 by the Wisconsin division of health. A level II local health department shall show evidence of all of the following:

1. That each objective has been selected through a process which is based on assessed need, incorporates the views of citizens and leaders from the public and private sectors of the community, and formally recognizes that the objective is a public health priority for the community.

2. That the local health department has identified resources or services which it will commit to achieving the objectives.

3. That contemporary public health practices of proven merit are being used to provide services to the community to achieve the objectives.

4. That the local health department has established a process whereby it will evaluate and report to the community on progress and performance toward achieving the objectives.

Note: The publication, *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*, may be consulted at the offices of the Department's Bureau of Public Health, the Legislative Reference Bureau or at any public library.

(2) OPTIONAL SERVICES. A level II local health department may provide any services, in addition to the services required under sub. (1), that a level III local health department is required to provide under s. DHS 140.06.

(3) ANNUAL REPORTS. Within 120 days after the close of the calendar year, a level II local health department shall submit the following reports to the department:

(a) A copy of the local health department's annual report for the preceding calendar year, if required by the local governing body.

(b) Annual survey of local health departments for the Wisconsin public health data system in a format prescribed by the department.

(c) A report, in a format prescribed by the department, on the activities of the local health department for the preceding calendar year, including a narrative which describes the progress and performance toward achieving the objectives identified as part of its community health assessment and that are linked to one objective from each section of sections 2 to 8 of *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*.

History: Cr. Register, July, 1998, No. 511, eff. 8-1-98.

DHS 140.06 Level III local health department.

(1) REQUIRED SERVICES. A level III local health department shall do all of the following:

(a) Provide or arrange for provision of all services required under s. DHS 140.04 for a level I local health department.

(b) Provide or arrange for the provision of services that address at least 3 objectives from each section of sections 2 to 8 of *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*, published in February 1990 by the Wisconsin division of health. A level III local health department shall show evidence of all of the following:

1. That each objective has been selected through a process which is based on assessed need, incorporates the views of citizens and leaders from the public and private sectors of the community, and formally recognizes that the objective is a public health priority for the community.

2. That the local health department has identified resources or services which it will commit to achieving the objectives.

3. That contemporary public health practices of proven merit are being used to provide services to the community to achieve the objectives.

4. That the local health department has established a process by which it will evaluate and report to the community on progress and performance toward achieving the objectives.

Note: The publication, *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*, may be consulted at the offices of the Department's Bureau of Public Health, the Legislative Reference Bureau or at any public library.

(c) Conduct inspections and investigations, issue permits and enforce the department's environmental sanitation rules, chs. DHS 172, 175, 178, 195, 196, 197 and 198, upon entering into an agreement with the department under s. 254.69, Stats., and ch. DHS 192 to serve as the department's agent for this purpose in the local health department's area of jurisdiction.

(e) Conduct an environmental health program as directed by the local board of health or other local governing body. Environmental health staff who conduct the program may be directed by the appropriate local authority to do any of the following:

1. Participate in community health assessments; collect, review and analyze environmental and community health data; and undertake management, control and prevention of environmental factors that may adversely affect the health, safety or well-being of individuals or the community.

2. Participate and provide collaborative environmental health expertise in the development of community plans that include

identification of community health priorities, goals and objectives to address current and emerging environmental threats to the health of individuals, families, vulnerable population groups and the community as a whole, and contribute to planning efforts that support community strengths and assets.

3. Provide or arrange for the availability of services authorized under ch. 254, Stats., such as for toxic substances, indoor air quality, animal borne or vector borne disease and human health hazards.

4. Implement agreements with state agencies to provide or arrange for environmental health services authorized under state statute such as for administering state rules governing retail food establishments, private wells, safe drinking water, rabies prevention and air pollution control.

5. Document findings, recommendations and requirements based on environmental health inspections and inquiries.

6. Administer regulations adopted and designated by the board of health or other local governing body.

Note: The Department recommends that local boards of health and other local governing authorities employ the environmental health staff responsibilities set out in par. (e) as the basic framework for carrying out the required environmental health program.

(f) Provide or arrange for public health laboratory services appropriate to local health department resources and services that support current and emerging threats to the health of the community that are consistent with current state and federal rules governing public health laboratories.

(2) ANNUAL REPORTS. Within 120 days after the close of the calendar year, a level III local health department shall submit the following reports to the department:

(a) A copy of the local health department's annual report for the preceding calendar year, if required by the local governing body.

(b) Annual survey of local health departments for the Wisconsin public health data system in a format prescribed by the department.

(c) A report, in a format prescribed by the department, on the activities of the local health department for the preceding calendar year, including a narrative which describes the progress and performance toward achieving the objectives identified as part of its community health assessment and that are linked to 3 objectives from each section of sections 2 to 8 of *Healthier People in Wisconsin: A Public Health Agenda for the Year 2000*.

History: Cr., Register, July, 1998, No. 511, eff. 8-1-98; corrections in (1) (c) and (d) made under s. 13.92 (4) (b) 7., Stats., Register January 2009 No. 637; (1) (d) renum. to SPS 221.065 under s. 13.92 (4) (b) 1., Stats., Register December 2015 No. 720.

DHS 140.07 Designation of level of local health department.

(1) Under the authority of s. 251.20 (1), Stats., the department shall direct a process to formally review the operations of all local health departments in a county or municipality at least every 5 years. A review of the operations of a local health department shall result in a written finding issued by the state health officer as to whether the local health department satisfies the requirements for a level I, II or III local health department.

(2) In directing the review under sub. (1), the state health officer shall use department personnel and other appropriate local health officials who have expertise in the field of public health and are knowledgeable about the requirements for local health departments.

(3) The written finding under sub. (1) shall include any recommendations for improvement in staffing, functions and practices.

(4) When the written finding under sub. (1) is that a local health department meets the requirements for a level I, II or III local health department, the finding shall be in force for 5 years, unless the governing body of the county or municipality takes action which would change the findings of the review.

(5) When the written finding under sub. (1) is that a local health department does not meet the requirements for a level I

local health department under s. 251.05 (2) (a), Stats., and s. DHS 140.04, the department shall do all of the following:

(a) Inform the governing body of the county or municipality in writing of the finding and allow the governing body a period of time, as determined by the state health officer but not to exceed one year, to correct the identified deficiencies.

(b) Provide necessary technical assistance to help the governing body of the county or municipality remedy the identified deficiencies so that the local health department will comply with all

level I local health department staffing functions and practices.

(c) Conduct a formal review to ensure that the deficiencies have been corrected. If the deficiencies are not corrected, the department shall take appropriate action under s. 250.04 (2) or 252.03 (3), Stats.

(6) A local health department established under ch. 251, Stats., shall be presumed to be a level I local health department until found by the department to be otherwise following a review under sub. (1).

History: Cr. Register, July, 1998, No. 511, eff. 8-1-98.